



## *Donation Solicitation Letter Sample*

Dear \_\_\_\_\_ ,

The ***name of Local Council or Direct Services grantee*** has been designated by the Michigan Children's Trust Fund (CTF), a chapter of Prevent Child Abuse America (PCAA), as ***name of county's Local Council or Direct Services (choose one)*** organization. Our charge is to help assure the great childhoods that all children deserve by providing programming to prevent child abuse and neglect. Since 1983, April has been designated by presidential decree as Child Abuse Prevention (CAP) Month. During CAP Month we assert and reinforce the importance of strengthening our families with individuals and communities working together to prevent child maltreatment. This strengths-based approach helps ensure that all our children will be raised in loving and supportive environments that result in them becoming productive, prosperous citizens.

Although we receive a grant from CTF, we must also raise funds to adequately provide the child abuse and neglect prevention programming for our community. Examples of our programming accomplishments of the past year include ***Insert council accomplishments here***. Our organization's work has positively impacted our community. According to ***insert any testimonial quotes from those served by the council, not more than 2 or 3***. Additional information about our organization and/or CTF of Michigan is available upon request.

We ask you to support the children and families of our community with the belief that all our children deserve a great childhood by giving generously to ***name of Organization***. Each dollar collected will go directly to programming which will help to strengthen families in our community and protect our children from potential abuse and neglect. We all have a part to play in making sure that our community is the best place for children and families to thrive.

To donate, please make your check out to ***name of Organization***, complete the form that accompanies this letter and send to the stated address or go to our online donation page ***insert link***. Feel free to contact us with any questions that you may have. Thank you!

Sincerely,

### **Insert Council Salutation including**

- Representative Name:
- Position Title
- Organization Name
- Email address
- Phone number

The ***name of Organization*** is a not for profit organization. (Note if the organization is a 501c3 or its equivalent).

**Insert Organization Name**



# Children's Trust Fund

Michigan's chapter of  Prevent Child Abuse  
America

## Donation Form

Donor Name:

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☐ I am making a personal donation ☐ I am making a donation on behalf of an organization

Phone:  Email:

Mailing Address:

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Amount of Donation (Please check appropriate box):

☐ \$5 ☐ \$10 ☐ \$20 ☐ \$50 ☐ \$100 ☐ \$200 \$  Other

Would you like to designate your donation for a specific program or purpose? ☐ Yes ☐ No

If yes, please specify:

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May we add you to our contacts list so that you can receive any news and updates?

☐ Yes! ☐ Not at this time

Please send your tax-deductible contribution to the following address:

**Insert Name and Address of Local Council/Direct Service Organization)**

If making your tax-deductible contribution by credit card, please visit **insert Local Council website** or over the phone by calling **insert Local Council phone number**